

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Rm		10-11-01
O.I.P.E. CLASSIFIER		X3	10/29/01
FORMALITY REVIEW	FR	1018	10/29/01
RESPONSE FORMALITY REVIEW	HC	712	10-07-02

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	1	10/29/01
2	-	1	
3	-	1	
4	-	1	
5	-	1	
6	-	1	
7	-	1	
8	✓	1	10/29/01
9	✓	1	
10	-	1	
11	-	1	
12	-	1	
13	✓	1	
14	-	1	
15	-	1	
16	✓	1	
17	-	1	
18	-	1	
19	✓	1	
20	-	1	
21	-	1	
22	✓	1	
23	✓	1	
24	-	1	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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150	-		

If more than 150 claims or 10 actions  
staple additional sheet here

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9/29/01  
1127  
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